

Annual Report Form

1997

Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

PRAIRIE ANIMAL HOSPITAL, P.A.
DAVID F. TESTER
P. O. BOX 788

HAYDEN LAKE

ID 83835

2. Registered Agent and Office NOT A P.O. BOX

DAVID F. TESTER
W. 920 PRAIRIE AVENUE

COEUR D'ALENE ID. 83814

3. Organized Under the Laws of:

ID

C 62828

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President David F. Tester

W. 920 Prairie Avenue

Coeur d'Alene

Id.

83815

Vice-President Jon C. Bloxham

W. 920 Prairie Avenue

Coeur d'Alene,

Id.

83815

Secretary James R. Meyer

W. 920 Prairie Avenue

Coeur d'Alene

Id.

83815

5.

Veterinary Practice

6.

Signature

David F. Tester, DVM

Date

October 28, 1997

Name (Typed or Printed)

David F. Tester, DVM

Title

President

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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